NOV 2 2 2005

CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Kit S. Lam and Derick H. Lau Serial No.: 10/682,659 Art Unit: 1639 Examiner: Teresa D. Wessendorf Filed: October 8, 2003 For: Method for Screening Combinatorial Bead Library; Ligands for Cancer Cells

> November 22, 2005 Sacramento, California 95814

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

REQUEST FOR INTERVIEW UNDER 37 C.F.R. § 1.133

Applicant hereby requests an interview with the Examiner, pursuant to 37 C.F.R. section 1.133 and MPEP Section 713.01, after the Examiner has considered the effect of applicant's reply to the Office Action mailed on May 23, 2005.

Date: November 22, 2005

Respectfully submitted,

Audrey A. Millemann (Reg. No.44,942)

Attorney for Applicants Weintraub Genshlea Chediak

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PAGE

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Atty Docket No.

8141/11803

PTO FAX NO.:

1-571-273-8300

Attn:

Teresa D. Wessendorf

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following in re Serial No. 10/682,659, is being facsimile transmitted to the Patent and Trademark Office on the date shown below:

- (1) Transmittal Form (1 pg);
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- (3) Amendment (7 pgs);
- (4) Petition for Extension of Time (2 pages, original and one copy); and
- (5) Request for Interview (1 pg).

As set forth in the fee transmittal, we hereby authorize the use of Deposit Account No. 501176 for any fees that may be owed with this application.

Should you have any questions, please call me.

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Dated: November 22, 2005

Audrey A. Millemann (Reg. No. 44,942)

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{8141/11803/AAM/859349.DOC;}

Attorney Docket No. 8141/11803

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| | Application Number | 10/682,659 | - | | |
| TRANSMITTAL | Filing Date | October 8, 20 | 03 | | |
| FORM | First Named Inventor | Kit S. Lam | Kit S. Lam | | |
| | Art Unit | 1639 | | | |
| (to be used for all correspondence after Initial fil. | Examiner Name | Teresa D. We | esendorf | | |
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| Firm Name Weintraub Genshlea Ched | iak . | | | | |
| Signature Middle 0 | men | | | | |
| Printed name Audrey A. Millemann | | | | | |
| Date November 22, 2005 | | Reg. No. 4 | 4,942 | | |
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| I hereby certify that this correspondence is be sufficient postage as first class mail in an env the date shown below: | elope addressed to: Commissioner | PTO or deposite for Patents, P.C | ed with the Un D. Box 1450, / | ited States Postal Service with Alexandria, VA 22313-1450 on | |
| Signature | ou de | $\wedge \wedge \wedge$ | | | |
| Typed or printed name Audrey A. Millems | ann | | Date | November 22, 2005 | |

This collection of Information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the intrividual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be earn to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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NOV 2 2 2005, Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE nond to a collection of information unless it disclave a valid OMR control number Under the Paperwork Reduction Act of 1995, no p Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/682,659 Application Number TRANSMITTA Filing Date October 8, 2003 For FY 2005 First Named Inventor Kît \$. Lam Examiner Name Teresa D. Wessendorf Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1639 TOTAL AMOUNT OF PAYMENT 510.00 8141/11803 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Money Order Credit Card None Other (please identify): Deposit Account Name: Weintraub Genshlea et al. Deposit Account Deposit Account Number: 501176 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** FILING FEES SEARCH FEES Small Entity **Small Entity** Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 200 Utility 150 500 250 100 200 130 Design 100 100 50 65 200 100 300 160 Plant 150 80 Reissuc 300 150 500 600 300 250 **Provisional** 200 100 0 0 0 Small Entity 2. EXCESS CLAIM FEE\$ Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 200 100 Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims Multiple Dependent Claims **Total Claims** Fee Paid (\$) Extra Claims Fee (\$) Fee Paid (\$) Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee (\$) Fee Paid (\$) Indep, Claims -3 or HP ≠ HP = highest number of independent claims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Total Sheets Extra Sheets (round up to a whole number) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 510.00 Other (e.g., late filing surcharge): Petition for Extension of Time

| | Telephone 916-558-6033 |
|---------------------------------------|------------------------|
| Name (Print/Type) Audrey A. Millemann | Date November 22, 2005 |

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